

## STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## RECEIVED

OCT 29 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

## tor LOBBYISTS (RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) Brue	ce A Rerke Simon D. m.		DEPARTMENT OF S
II. Name of Johnvist's partner	bi- C	omson and Erle B. Pierce	
II. Name of lobbyist's partners		ny:	
Sheehan Phinney Capitol (	<b>Στου</b> π		
(Name of partn	ership, firm or corporation)		
	i v an evipotation)		
Two Eagle Square	Concord	NH	
Business Address: (Strect)	(Town/City)	(State)	03301
(603) 228-2370 (603) 2	•	• /	(Zip Code)
$(Telephone) \qquad (603) 2$	<u> 24-8899                                  </u>	Osheehan.com, sthomson@	Ochachan -
(Feephone) (Fe	epierce	a)sheehan.com	esneenan.com and
III. This statement covers: (Cho			
III. This statement covers: (Cho reportable expense transactions	which are not swall and a	s for each client, OR you may	file a separate range 6
All reportable transactions oc	curring in the months prior to a	he reporting date relative to the	
IIS Torm Limit		the reporting date relative to the	following client:
U.S. Term Limits			
OR (Full	Name of Client as it appears of	n the Lobbyist Registration For	
All repartable transactions by unrelated to ony particular client.	the lobbidge to the	of a stable and the first teachers and the first teachers are the first teachers and the first teachers are the first teachers and the first teachers are the fi	111)
unrelated to ony particular client.	the loobyist (including the lob	byist's family), or the lobbying j	arm listed below which are
132			with are
IV. Date of Report April 25,	2018	July 25, 2018	
October 31, 2018 (X)			
activity from 10/1/18 to 12/31/19			18
V. There have been no fees receive	ed and no renewable		
V. There have been no fees received and no reportable transactions made since the last report.     If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.			
Concord, NH 03301.	submit it to the S	ecretary of State's Office, State	House, Room 204,
VI. Check if additional reports are	attached:	•	
If you have paid an honor	r made expenditures, you mus	file Addendum A- Fees and E	Xnencov
Expense Reimbursement	P +-10+04	roo most me Aladendum B R.	Prort of Honoral
If you, your firm, or your f	amily has made political onne	butions, you must file Addende	The state of the s
S	my made pontical contri	outions, you must file Addendi	um C~ Political Contributions
Sworn Statement/Affirmation by L	obbyist		
Thave read RSA 15, RSA 15-B and F the best of my knowledge and belief.	RSA 664 and hereby swear or a	ffirm that the foregoing informa-	
with out of my knowledge and belief:		and the leaves and information	ation is true and complete to
- In Balse	<u> </u>		
(Signature of lobbyist) Oclober 31, 2018			
(Date)			
Bruce A. Berke, Simon P. Thomson and Erle B. Pierce			
(Print Name of lobbyist)	and Life D. PIETCE		